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B 22C (Official Form 22C) (Chapter 13) (04/13) In re: Richard M. Malfer

Case Number: 13-33355-H5-13

Laura H. Malfer

I	According to the calculations required by this statement:
I	☐ The applicable commitment period is 3 years.
I	☑ The applicable commitment period is 5 years.
I	✓ Disposable income is determined under § 1325(b)(3).
I	☐ Disposable income is not determined under § 1325(b)(3).
١	(Check the hoxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	whit desired may complete one diatement only.							
L	Part I. REPORT OF INCOME							
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.							
	a. [b. [v	_ ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	e's Income") for Li	nes 2-10				
		gures must reflect average monthly income receive						
1		ng the six calendar months prior to filing the bankru			Column A	Column B		
		e month before the filing. If the amount of monthly			Debtor's	Spouse's		
		ths, you must divide the six-month total by six, and	enter the result on	the	Income	Income		
		opriate line.			***	fc 424 02		
2		ss wages, salary, tips, bonuses, overtime, comi ome from the operation of a business, professio		act Line h from	\$0.00	\$6,134.83		
	Line	a and enter the difference in the appropriate colum	nn(s) of Line 3. If yo	ou operate more				
		one business, profession or farm, enter aggregate						
3		ttachment. Do not enter a number less than zero. iness expenses entered on Line b as a deduction		any part of the				
	a.	Gross receipts	\$3,150.00	\$0.00				
	b.	Ordinary and necessary business expenses	\$0.00	\$0.00				
	C.	Business income	Subtract Line b	, , , , ,	\$3,150.00	\$0.00		
		t and other real property income. Subtract Line			40,100.00	Ψοίου		
	diffe	rence in the appropriate column(s) of Line 4. Do no	ot enter a number l	ess than zero.				
4		not include any part of of the operating expense art IV.	s entered on Line	b as a deduction				
	a.	Gross receipts	\$0.00	\$0.00				
	b.	Ordinary and necessary operating expenses	\$0.00	\$0.00				
	c.	Rent and other real property income	Subtract Line b	from Line a	\$0.00	\$0.00		
5	Inte	rest, dividends, and royalties.			\$0.00	\$0.00		
6		sion and retirement income.			\$234.00	\$0.00		
		amounts paid by another person or entity, on a enses of the debtor or the debtor's dependents,						
7		purpose. Do not include alimony or separate mair						
		by the debtor's spouse. Each regular payment sh	00.00	40.00				
		mn; if a payment is listed in Column A, do not repor	\$0.00	\$0.00				
		mployment compensation. Enter the amount in ever, if you contend that unemployment compensa		` '				
8		use was a benefit under the Social Security Act, do						
	com	pensation in Column A or B, but instead state the a	amount in the space	e below:				
	Un	employment compensation claimed to be a	Debtor	Spouse				
		nefit under the Social Security Act	\$2,899.00	\$0.00	\$0.00	\$0.00		
		ome from all other sources. Specify source and		-	-	<u> </u>		
	sour	ces on a separate page. Total and enter on Line 9	Do not include	alimony or				
		arate maintenance payments paid by your spou limony or separate maintenance. Do not includ						
9	the S	Social Security Act or payments received as a victir						
	hum	anity, or as a victim of international or domestic ter						
	a.	VA Disablity		\$129.00				
	b.			Ţ120.00	•			
		<u> </u>			\$129.00	\$0.00		

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10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$3,513.00	\$6,134.83				
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.						
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PE	ERIOD					
12	Enter the amount from Line 11.		\$9,647.83				
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you calculation of the commitment period under § 1325(b)(4) does not require inclusion of the inco spouse, enter on Line 13 the amount of income listed in Line 10, Column B that was NOT paid regular basis for the household expenses of you or your dependents and specify, in the lines be basis for excluding this income (such as payment of the spouse's tax liability or the spouse's supersons other than the debtor or the debtor's dependents) and the amount of income devoted purpose. If necessary, list additional adjustments on a separate page. If the conditions for entadjustment do not apply, enter zero.	me of your I on a pelow, the upport of to each					
	a.						
	b.						
	c.						
	Total and enter on Line 13.	_	\$0.00				
14	Subtract Line 13 from Line 12 and enter the result.		\$9,647.83				
15	5 Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result. \$115,773.96						
16	Applicable median family income. Enter the median family income for applicable state and size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the court.) a. Enter debtor's state of residence: Texas b. Enter debtor's household.	bankruptcy	\$67,296.00				
	a. Enter debtor's state of residence: Texas b. Enter debtor's household Application of § 1325(b)(4). Check the applicable box and proceed as directed.	1 5126	ψ07,230.00				
17	 ☐ The amount on Line 15 is less than the amount on Line 16. Check the box for "The ap 3 years" at the top of page 1 of this statement and continue with this statement. ☑ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The is 5 years" at the top of page 1 of this statement and continue with this statement. 		·				
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOS	SABLE INCOM	1E				
18	Enter the amount from Line 11.		\$9,647.83				
19	expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. b.						
- 1	c.						

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20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.						
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.						
22	Applicable median family income. Enter the amount from Line 16.						
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed. ☑ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. ☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. DO NO COMPLETE PARTS IV, V, OR VI.						

		Part IV. C.	ALCULATION	OF D	EDUCTIONS FROM INC	COME			
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)									
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number or persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.								
24B	Out-off for Out www.u person 65 year categor of any person person	nal Standards: health care. f-Pocket Health Care for perso at-of-Pocket Health Care for pe usdoj.gov/ust/ or from the clerk as who are under 65 years of a ars of age or older. (The applic ory that would currently be allow additional dependents whom as under 65, and enter the res as 65 and older, and enter the ant, and enter the result in Line	ns under 65 years of the bankruptcy age, and enter in Label number of pewed as exemptions you support.) Multin Line c1. Multiresult in Line c2.	of age age or court.) ine b2 ersons s on yo tiply Lin	, and in Line a2 the IRS Nation older. (This information is ava Enter in Line b1 the applicable the applicable number of persion each age category is the number at the all by Line b1 to obtain a totole a2 by Line b2 to obtain a totole a	nal Standards iilable at le number of ons who are imber in that olus the number al amount for ial amount for			
	Pers	sons under 65 years of age		Persons 65 years of age or older					
	a1.	Allowance per person	\$60.00	a2.	Allowance per person	\$144.00			
	b1.	Number of persons	3	b2.	Number of persons	1			
	c1.	Subtotal	\$180.00	c2.	Subtotal	\$144.00	\$324.00		
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This						\$645.00		

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25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. DO NOT ENTER AN AMOUNT LESS THAN ZERO.						
	a.	IRS Housing and Utilities Standards; mortgage/rent expense	\$1,410.00				
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$1,270.98				
	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$139.02			
26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:						
	You	al Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless of whether ating a vehicle and regardless of whether you use public transportation.					
27A							
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that						

	·				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. DO NOT ENTER AN AMOUNT LESS THAN ZERO.				
	a. IRS Transportation Standards, Ownership Costs \$517.00				
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$324.34				
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	\$192.66			
29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. DO NOT ENTER AN AMOUNT LESS THAN ZERO.				
	a. IRS Transportation Standards, Ownership Costs \$517.00				
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 \$39.62				
	c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$477.38			
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. DO NOT INCLUDE REAL ESTATE OR SALES TAXES.				
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. DO NOT INCLUDE DISCRETIONARY AMOUNTS, SUCH AS VOLUNTARY 401(K) CONTRIBUTIONS.				
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. DO NOT INCLUDE PREMIUMS FOR INSURANCE ON YOUR DEPENDENTS, FOR WHOLE LIFE OR FOR ANY OTHER FORM OF INSURANCE.	\$68.00			
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. DO NOT INCLUDE PAYMENTS ON PAST DUE OBLIGATIONS INCLUDED IN LINE 49.	\$0.00			
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcaresuch as baby-sitting, day care, nursery and preschool. DO NOT INCLUDE OTHER EDUCATIONAL PAYMENTS.				
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. DO NOT INCLUDE PAYMENTS FOR HEALTH INSURANCE OR HEALTH SAVINGS ACCOUNTS LISTED IN LINE 39.				
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone servicesuch as pagers, call waiting, caller id, special long distance, or internet serviceto the extent necessary for your health and welfare or that of your dependents. DO NOT INCLUDE ANY AMOUNT PREVIOUSLY DEDUCTED.				
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$5,485.06			
$\overline{}$					

	Subpart B: Additional Living Expense Note: Do not include any expenses that you have					
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.					
	a. Health Insurance	\$425.00				
39	b. Disability Insurance	\$0.00				
	c. Health Savings Account	\$0.00				
	Total and enter on Line 39					
	IF YOU DO NOT ACTUALLY EXPEND THIS TOTAL AMOUNT, state your act expenditures in the space below:	tual total average monthly				
40	Continued contributions to the care of household or family members. E monthly expenses that you will continue to pay for the reasonable and necess elderly, chronically ill, or disabled member of your household or member of you unable to pay for such expenses. DO NOT INCLUDE PAYMENTS LISTED IN	sary care and support of an our immediate family who is	\$0.00			
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.					
42	Home energy costs. Enter the total average monthly amount, in excess of the Local Standards for Housing and Utilities, that you actually expend for home of PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUMENT DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS RE	energy costs. YOU MUST TUAL EXPENSES, AND YOU				
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST EXPLAIN WHY THE AMOUNT CLAIMED IS REASONABLE AND NECESSARY AND NOT ALREADY ACCOUNTED FOR IN THE IRS STANDARDS.					
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.					
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). DO NOT INCLUDE ANY AMOUNT IN EXCESS OF 15% OF YOUR GROSS MONTHLY INCOME.					
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lin	nes 39 through 45.	\$475.00			

			Subpart C: Deductions for Del					
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.							
		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?			
	a.	Capital One Auto Finance	2007 Ford F150	\$39.62	□ yes 🗹 no			
	b.	Chase	16610 Bobcat Trail, Cypress	\$1,270.98	yes □ no			
	c.	IRS Special Procedures	Any equity in real property ir	\$0.00	yes √ no			
		(See continuation page.)		Total: Add Lines a, b and c		\$1,634.94		
48	resid you in ac amo fored	lence, a motor vehicle, or other promay include in your deduction 1/60 Idition to the payments listed in Lirunt would include any sums in defolosure. List and total any such an parate page.	If any of debts listed in Line 47 a operty necessary for your support 0th of any amount (the "cure amoune 47, in order to maintain possess ault that must be paid in order to a nounts in the following chart. If ne	or the support of yount") that you must posion of the property avoid repossession cessary, list addition	our dependents, cay the creditor The cure or nal entries on			
	_	Name of Creditor	Property Securing the De		he Cure Amount			
	a. b.	Chase	16610 Bobcat Trail, Cypres	SS, 12	\$633.33			
	C.				+			
	<u> </u>			Total: Add	Lines a, b and c	\$633.33		
49	as p	riority tax, child support and alimor	ims. Enter the total amount, diving claims, for which you were liable OBLIGATIONS, SUCH AS THOSE	e at the time of your	bankruptcy	\$278.85		
		pter 13 administrative expenses Iting administrative expense.	. Multiply the amount in Line a by	the amount in Line	b, and enter the			
	a.	Projected average monthly chap			\$3,160.00			
50	b.	issued by the Executive Office for	as determined under schedules or United States Trustees. (This isdoj.gov/ust/ or from the clerk of		6 %			
	C.	Average monthly administrative	expense of chapter 13 case	Total: Multip	oly Lines a and b	\$189.60		
51	Tota	<u> </u>	Enter the total of Lines 47 through			\$2,736.72		
			ubpart D: Total Deductions fr					
52	Tota	I of all deductions from income	. Enter the total of Lines 38, 46 a	nd 51.		\$8,696.78		
		Part V. DETERMINA	ATION OF DISPOSABLE IN	NCOME UNDER	R § 1325(b)(2)			
53	Tota	I current monthly income. Ente	er the amount from Line 20.			\$9,647.83		
54	disal	oility payments for a dependent ch	average of any child support paym ild, reported in Part I, that you reco xtent reasonably necessary to be	eived in accordance	e with			

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60

61

55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).						
56	Tota	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.					
57	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF THESE EXPENSES AND YOU MUST PROVIDE A DETAILED EXPLANATION OF THE SPECIAL CIRCUMSTANCES THAT MAKE SUCH						
	a.	BUSINESS EXPENSE: Supplies MAterials Office Expenses	\$100.00				
	b.	BUSINESS EXPENSE: travel/dining	\$75.00				
	c.	Joint BUSINESS EXPENSE : telephone/communications	\$250.00				
		(See continuation page.)	Total: Add Lines a, b, and c	\$1,025.00			
58	8 Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.						
	ente	er the result.		\$9,721.78			

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

Expense Description Monthly Amount

a.
b.
c.
Total: Add Lines a, b, and c \$0.00

Part VII: VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct.

(If this is a joint case, both debtors must sign.)

Date:

Date:

Signature:

Sig

Laura H. Malfer

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B 22C (Official Form 22C) (Chapter 13) (04/13)

47. Future payments on secured claims (continued):

Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
Santander Consumer USA	Toyota Camry	\$324.34	yes √ no

57. Deduction for Special Circumstances (continued):

Nature of Special Circumstances	Amount of Expense
JOINT BUSINESS EXPENSE : Transportation	\$550.00
JOINT EZ Tags	\$50.00

Current Monthly Income Calculation Details

In re: Richard M. Malfer Case Number: 13-33355-H5-13

Laura H. Malfer Chapter: 13

2. Gross wages, salary, tips, bonuses, overtime commissions.

Debtor or Spouse's Income	Description (if available)						
	6	5	4	3	2	Last	Avg.
	Months	Months	Months	Months	Months	Month	Per
	Ago	Ago	Ago	Ago	Ago		Month

Spouse Estimated earnings 12/12>

\$6,526.14 \$8,836.50 \$4,109.70 \$3,155.34 \$6,662.28 \$7,519.02 **\$6,134.83**

3. Income from the operation of a business, profession or farm.

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	Estimated gr	oss 1099 ear	nings	·	·	·	
Gross receipts	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00
Ordinary/necessary business expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Business income	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00	\$3,150.00

6. Pension and retirement income.

Debtor or Spouse's Income	Description (it	Description (if available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	KFC penisor \$234.00	-	\$234.00	\$234.00	\$234.00	\$234.00	\$234.00

8a. Unemployment compensation claimed to be a benefit under the Social Security Act.

	Ago	Ago	Ago	Ago	Ago		Month
	Months	Months	Months	Months	Months	Month	Per
	6	5	4	3	2	Last	Avg.
Debtor or Spouse's Income	Description (if available)						

<u>Debtor</u> <u>Social Security</u>

\$2,899.00 \$2,899.00 \$2,899.00 \$2,899.00 \$2,899.00 \$2,899.00 **\$2,899.00**

9. Income from all other sources.

Debtor or Spouse's Income	Description ((if available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	VA Disablity						

<u>Deptor</u> <u>VA Disability</u>

\$129.00 \$129.00 \$129.00 \$129.00 \$129.00 \$129.00 **\$129.00**

Underlying Allowances

In re: Richard M. Malfer Laura H. Malfer Case Number: 13-33355-H5-13

Chapter: 13

Median Income Information				
State of Residence	Texas			
Household Size	4			
Median Income per Census Bureau Data	\$67,296.00			

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous				
Region	US			
Family Size	4			
Gross Monthly Income	\$9,647.83			
Income Level	Not Applicable			
Food	\$777.00			
Housekeeping Supplies	\$74.00			
Apparel and Services	\$244.00			
Personal Care Products and Services	\$70.00			
Miscellaneous	\$300.00			
Additional Allowance for Family Size Greater Than 4	\$0.00			
Total	\$1,465.00			

National Standards: Health Care (only applies to cases filed on or after 1/1/08)					
Household members under 65 years of age					
Allowance per member	\$60.00				
Number of members	3				
Subtotal	\$180.00				
Household members 65 years of age or older					
Allowance per member	\$144.00				
Number of members	1				
Subtotal	\$144.00				
Total	\$324.00				

Local Standards: Housing and Utilities				
State Name	Texas			
County or City Name	Harris County			
Family Size	Family of 4			
Non-Mortgage Expenses	\$645.00			
Mortgage/Rent Expense Allowance	\$1,410.00			
Minus Average Monthly Payment for Debts Secured by Home	\$1,270.98			
Equals Net Mortgage/Rental Expense	\$139.02			
Housing and Utilities Adjustment	\$0.00			

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Underlying Allowances

In re: Richard M. Malfer Case Number: 13-33355-H5-13 Laura H. Malfer

Chapter: 13

Local Standards: Transportation; Vehicle Operation/Public Transportation					
Transportation Region		Houston			
Number of Vehicles Opera	ted	2 or more			
Allowance		\$624.00			
Local Standards: Transportation; Additional Public Transportation Expense					
Transportation Region		Houston			
Allowance (if entitled)	\$182.00				
Amount Claimed	mount Claimed		\$0.00		
	Local Standards: Trans	portation; Owners	hip/Lease Expense		
Transportation Region		Houston	Houston		
Number of Vehicles with O	wnership/Lease Expense	2 or more	2 or more		
	First Car	•	Second Car		
Allowance	\$517.00		\$517.00		
Minus Average Monthly Payment for Debts Secured by Vehicle	\$324.34		\$39.62		
Equals Net Ownership / Lease Expense	\$192.66		\$477.38		